



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

<b>Application No.</b>	<b>08/977,644</b>		
	<b>Filing Date</b>	<b>November 24, 1997</b>	
	<b>First Named Inventor</b>	<b>Emerson</b>	
	<b>Examiner Name</b>	<b>Neil S. Levy</b>	
	<b>Group Art Unit</b>	<b>1616</b>	
<b>Total Number of Pages in This Submission</b>	<b>12</b>	<b>Attorney Docket No.</b>	<b>RE-70631/DJB/DJM</b>

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Response	<input type="checkbox"/> Licensing-related Papers	<input checked="" type="checkbox"/> Appeal Communication to Group (Notice of Appeal)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input checked="" type="checkbox"/> Supplemental Declaration for Reissue Patent	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Check in the amount of \$310 (Notice of Appeal: \$250; and 1 mo. extension \$ 60)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, No. of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<b>Remarks</b>	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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<b>Signature</b>		
<b>Date</b>	April 8, 2005	

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with Sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:			April 8, 2005
<b>Typed or printed name</b>	Lisa Jeanetta		
<b>Signature</b>		<b>Date</b>	April 8, 2005